DOCKET	NO.	LKS94-04A2

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## Declaration for Patent Application

As a named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name;

I believe I am the original, first and sole inventor (if only one name is listed) or an original, first and joint inventor (if plural names are listed in the signatory page(s) commencing at page 3 hereof) of the subject matter which is claimed and for which a patent is sought on the invention entitled

	Mucosal Vascular	Addressins	and Uses Thereof	
the specifica	tion of which (ch	eck one)		
[] is attac	ched hereto.			
[X] was file	ed on 12 Februar	ry 1996	as United States A	pplication
			tion Serial No. PCT/US96/021	
and was	amended on	<u></u>	(if applicable).	
above-identif.	y state that I had ied specification erred to above.	ve reviewed , including	d and understand the content of the claims, as amended by	s of the any
I acknown be material to	wledge the duty to patentability a	o disclose s defined i	information which is known n 37 C.F.R. §1.56.	by me to
Code, \$119 of listed below a or inventor's	any foreign appland have also ider certificate having ity is claimed:	ication(s) ntified bel ng a filing	mefits under Title 35, Unite for patent or inventor's ce ow any foreign application date before that of the ap	rtificate
			<u></u>	Priority Not Claim
(Number)	(Cou	ntry)	(Day/Month/Year filed)	[ ]
(Number)	(Cou	ntry)	(Day/Month/Year filed)	[ ]
(Number)	(Cour	ntry)	(Day/Month/Year filed)	[ ]
I hereby claim provisional ap	n the benefit underpplication(s) list	er 35 U.S.C ted below.	. §119(e) of any United Sta	tes
(Application N	Number)	(Fili	ng Date)	
(Application N	Number)	(Fili	ng Date)	

I hereby claim the benefit under Title 35, United States Code, \$120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, \$112, I acknowledge the duty to disclose information known by me to be material to patentability as defined in 37 C.F.R. \$1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

08/386,857	February 10, 1995	pending		
(Application Serial No.)	(Filing date)	(Status, patented,	pending,	abandoned)
08/523,004	September 1, 1995	pending		
(Application Serial No.)	(Filing date)	(Status, patented,	pending,	abandoned)
(Application Serial No.)	(Filing date)	(Status, patented,	pending,	abandoned)

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

I also hereby grant additional Powers of Attorney to the following attorney(s) and/or agent(s) to file and prosecute an international application under the Patent Cooperation Treaty based upon the above-identified application, including a power to meet all designated office requirements for designated states:

James M. Smith R	Reg. No. Reg. No. Reg. No. Reg. No.	28,043 20,884 32,227 31,804	Thomas O. Hoover Alice O. Carroll N. Scott Pierce Richard A. Wise Helen E. Wendler Carolyn S. Elmore	•
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all of Hamilton, Brook, Smith and Reynolds, P.C., Two Militia Drive, Lexington, Massachusetts 02173;

Send correspondence to: Hamilton, Brook, Smith Two Militia Drive, Lex	
Direct telephone calls	
617-861-6240	Facsimile: 617-861-9540

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

28 Harbell Street				
Inventor's   Signature   28 Harbell Street   Lexington, MA 02173	Full name of sole			
Signature	or first inventor $\_$	Michael J. Briskin		
Residence Lexington, MA 02173  Citizenship US  Post Office Address Same  Full name of second joint inventor, if any Douglas J. Ringler  Inventor's Signature Date  Residence 382 Ocean Avenue, #1008  Revere, MA 02151  Citizenship US  Post Office Address Same  Full name of third joint inventor, if any Dominic Picarella  Inventor's Signature Date  Residence 9 Kay Street Sudbury, MA 01776  Citizenship US  Post Office Address same  Full name of third joint inventor, if any Dominic Picarella  Inventor's Signature Same  Full name of third joint inventor, if any US  Post Office Address Same  Full name of third joint inventor, if any US  Fost Office Address Same  Full name of third joint inventor, if any Walter Newman  Inventor's Signature Date  Residence 3 Durham Street, #3  Boston, MA 02115  Citizenship US	Inventor's			
Residence Lexington, MA 02173  Citizenship US  Post Office Address Same  Full name of second joint inventor, if any Douglas J. Ringler  Inventor's Signature Date  Residence 382 Ocean Avenue, #1008  Revere, MA 02151  Citizenship US  Post Office Address Same  Full name of third joint inventor, if any Dominic Picarella  Inventor's Signature Date  Residence 9 Kay Street Sudbury, MA 01776  Citizenship US  Post Office Address same  Full name of third joint inventor, if any Dominic Picarella  Inventor's Signature Date  Residence 9 Kay Street Sudbury, MA 01776  Citizenship US  Full name of third joint inventor, if any Walter Newman Inventor, if any Walter Newman Inventor's Signature Date  Residence 3 Durham Street, #3  Boston, MA 02115  Citizenship US	Signature		Date	
US	Residence	28 Harbell Street		
Full name of second joint inventor, if any Douglas J. Ringler Inventor's Signature Date  Residence 382 Ocean Avenue, #1008 Revere, MA 02151  Citizenship US Post Office Address same  Full name of third joint inventor, if any Dominic Picarella Inventor's Signature Date Residence 9 Kay Street Sudbury, MA 01776  Citizenship US Post Office Address same  Full name of third joint inventor's Signature Sudbury, MA 01776  Citizenship US Post Office Address same  Full name of third joint inventor, if any Walter Newman Inventor's Signature Date Residence 3 Durham Street, #3 Boston, MA 02115  Citizenship US		Lexington, MA 02173		
Post Office Address	Citizenship	US		
Full name of second joint inventor, if any	Post Office Address _			
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Inventor's Signature				
Signature	inventor, if any $\_$	Douglas J. Ringler		
Residence				
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US		Revere, MA 02151		
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Signature	inventor, if any			
Residence 9 Kay Street Sudbury, MA 01776  US  Post Office Address same  Full name of third joint inventor, if any Walter Newman  Inventor's Signature Date  Residence 3 Durham Street, #3 Boston, MA 02115  Citizenship US				
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Citizenship US  Post Office Address same  Full name of third joint inventor, if any Walter Newman  Inventor's Signature Date  Residence 3 Durham Street, #3  Boston, MA 02115  Citizenship US	residence			
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Full name of third joint  inventor, if any Walter Newman  Inventor's  Signature Date  Residence 3 Durham Street, #3  Boston, MA 02115  Citizenship US				
inventor, if any Walter Newman  Inventor's Signature Date Residence 3 Durham Street, #3 Boston, MA 02115  Citizenship US	Fost Office Address	same		
inventor, if any Walter Newman  Inventor's Signature Date Residence 3 Durham Street, #3 Boston, MA 02115  Citizenship US				
Inventor's  Signature				
Signature		walter Newman		
Residence				
Boston, MA 02115  Citizenship US			Date	
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